

My name is Lisa Klingbiel and I support House Bills 4900, 4901, and 4902. I have had Type-1 Juvenile Diabetes for over 35 years and my 8-year-old son Steven has been afflicted for a year and a half.

Diabetes wreaks havoc with all body systems and must be closely monitored 24 hours a day. One never gets a break from diabetes. For my son and I this means our day begins with a finger poke and the first of up to ten or more daily blood sugar tests. The blood test, the carbohydrate count from our breakfasts, and other factors including stress, illness, differences in activity levels, and growth and other hormones must be considered to help us calculate the amount of insulin needed to keep us healthy. My son and I must constantly test our blood sugar levels to try and mimic a normal person's physiological feedback loop that tells the body how much insulin to produce. Five or ten finger pokes a day is nowhere close to the constant monitoring a normal person's body provides and so our blood sugar levels can and do swinging wildly out of the normal range of between 70 and 120 g/dL. Every time our blood sugars move out of this range we risk damage to our bodies. If our blood sugar is too low, my son and I risk becoming confused, disoriented, and possibly losing consciousness and falling into convulsions. If glucose is not administered we can even die. If our blood sugar is too high we are putting ourselves at risk for the onset of the complications of diabetes. I know all too well about the complications of diabetes. I have been legally blind due to retinopathy and endured many eye surgeries to save my sight. I have degeneration of my nerves and have trouble with circulation in my legs. I suffer from other immune system problems and health issues related to diabetes. My chance of having a stroke, heart attack, kidney disease, amputations, and blindness are significantly elevated due to my diabetes. Thankfully, 85-years-ago Drs. Banting and Best devised a treatment for diabetes, insulin. Without it Steven and I would quickly waste and die. It is important to understand insulin is a TREATMENT and not a cure. Even with insulin pumps and self-monitoring insulin delivery is not like in a normal person.

A very long time ago in 1970, when I was diagnosed, my parents were told a cure would be found in the next ten years. Ten years came and went with no cure. Another ten years

came and went without a cure. Islet cell transplants have become a treatment option but not enough organs are available and transplantation requires the life-long use of immunosuppressive drugs. These drugs can cause deleterious side-effects including cancer, sterility, fetal damage, shingles, unusual infections, liver disease, and kidney disease. In other words, long term use of these drugs can be as or more dangerous than diabetes. In short, I gave up on my dream of finding a cure.

Two recent developments have reawakened my dream. The first was a diagnosis of diabetes for my son Steven. The second was the development of embryonic stem cell research and its promise for the cure of diseases like diabetes. Steven and I daily take care of our bodies in the hope that one day stem cells or some other as yet undiscovered breakthrough will lead to a cure. Even with the passage of this legislation a cure may not come in my lifetime. The outcome might be different for Steven. We do not have time to wait. Please pass HB 4900, 4901, and 4902.

Thank you.